

Early childhood oral health needs

Nevada State Oral Health Advisory Committee

Community Coalition for Oral Health

Northern Nevada Dental Coalition
for Underserved Populations (CUSP)



What is the Public Health issue?

Oral health is integral to general health.¹ Early Childhood Caries (ECC), previously known as baby bottle tooth decay, is severe and rampant decay that occurs in the primary teeth of infants and toddlers. It affects 5-10% of America's young children², and up to 20% of children from low-income families.³ Less severe decay also occurs in young children. In fact, 6 out of 10 children present with at least one or more decayed teeth by age five.⁴

Consequences of untreated ECC:²

- ✓ High risk of future decay⁵
- ✓ Pain
- ✓ Poor eating habits
- ✓ Weight loss
- ✓ Problems with speech, self-esteem, socialization

ECC is usually associated with frequent overexposure of primary teeth to sugar. This often occurs when infants and toddlers are repeatedly given pacifying bottles or sippy cups filled with milk, juice or other sweet liquids during the day or at bedtime.¹ Another risk factor associated with ECC is the mother's oral health due to the transmission of decay-causing bacteria from mother to child.²

The cost of treatment for ECC is very high. As of 2000, it was estimated that costs ranged from \$1,500 to \$2,000 per child depending on whether hospitalization and general anesthesia were necessary.¹ Prevention of ECC requires a comprehensive plan involving "at risk" communities and parents, general and pediatric dental providers, and primary and pediatric non-dental providers. The emphasis should be on healthy feeding practices, daily tooth cleaning, appropriate use of toothpaste and other products that contain fluoride, and early identification and timely referral and intervention for at-risk children.



How is Nevada doing?

In 2003, there were only twenty-one dentists in Nevada who specialized in pediatric dentistry.⁶ Thirteen of Nevada's 17 counties include groups of communities designated as Dental Health Professional Shortage Areas.

What is Nevada doing?

Nevada's **Healthy Smile – Happy Smile** curriculum is intended for individuals whose work brings them into regular contact with the families of young children age 0-3 years. After completing the class, participants are able to: 1) Identify the role of primary teeth and the benefits of a healthy smile for both children and pregnant women; 2) Define Early

Childhood Caries; 3) Describe the etiology of tooth decay; 4) List the risk factors associated with Early Childhood Caries; 5) List the effects and the financial impact of Early Childhood Caries; 6) Recognize Early Childhood Caries; 7) Demonstrate the “lift the lip” technique; 8) Select the appropriate anticipatory guidance based on the age of the child, for educating parents and caregivers on how to promote good oral health through feeding practices and hygiene; 9) Be knowledgeable about the advantages and benefits of fluoride varnish; 10) Describe the different strategies that can be used to treat Early Childhood Caries.

The curriculum may be accessed online. It consists of two parts: a Power Point presentation and a downloadable and printable Anticipatory Guidance Manual. The manual provides specific prevention objectives that are based on the age of the child. Handouts in both English and Spanish are included that may be used as a resource for clients.

- **Community water fluoridation** prevents decay and provides a protective benefit to Nevada’s children. Only about 69% of Nevada’s total population receives fluoridated water.⁷

Strategies for Nevada’s future:

- ✓ *Encourage general practice dentists to see pediatric patients.*
- ✓ *Promote reimbursement of Primary Care Providers by third-party payers for oral health screening, education and age-appropriate prevention practices for children and mothers.*
- ✓ *Promote increased access to dental care for Nevada’s children.*
- ✓ *Support proven community-based strategies to prevent tooth decay (water fluoridation and sealants).*

References:

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